

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☐ Ms.

☒ yes

☐ no

☒ Mr. Artist

GENE KANGAS

(Last Name Last)

Permanent
Address

6852 RAVENNA - PAINESVILLE

Street

City

44077

Zip

Tel. (216) 352-7541

Area Code

Temporary or
Studio Address

2307 CITESTER - CLEVE.

Street

City

44115

Zip

Tel. (216) 687-2090

Area Code

If you do not presently live in one of the counties of the
Western Reserve, which county were you born in? LAKE

Collaborator

NONE

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of
how the object is to be assembled and displayed.

Gene Kangas

This entry blank must be fully made out and signed. Unsigned
entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is
understood that the Museum will have the right to dispose for
its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on
exhibition until June 7, 1981.

The submission of objects will be construed as acceptance of
all conditions printed in the entry information.

Signature

Gene Kangas



ENTRY BLANKS

1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☒ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Materials

PAINTED STEEL

Title

GRAND LEDGE

Price or NFS

\$2,000

Insurance Value
if NFS OnlySize 50"L.
16"H.
28"W.

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

~~X~~

REJECTED

DO NOT WRITE IN THIS SECTION

16 (4)

ACCEPTED

~~X~~

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☒ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Materials

PAINTED STEEL

Title

SPRINGFIELD

Price or NFS

\$2,000

Insurance Value
If NFS OnlySize 40"L.
24"H.
38"W.

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

~~X~~

REJECTED

DO NOT WRITE IN
THIS SECTION

17 (4)

ACCEPTED

~~X~~

REJECTED

RECEIVED

BR 5-7

DATE